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APPLICATION NUMBER	FILING DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
09/974,956	10/11/2001	Masaru Hirata	14990

CONFIRMATION NO. 7595



OC000000007436004

#3

Paul J. Esatto, Jr.
Scully, Scott, Murphy & Presser
400 Garden City Plaza
Garden City, NY 11530

Date Mailed: 02/07/2002

RESPONSE TO REQUEST FOR CORRECTED FILING RECEIPT

Claims, Fees, Inventors and Continuity

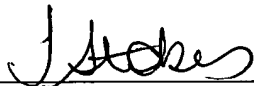
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PART 3 - OFFICE COPY

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To: U. S. Patent and Trademark Office Attention: Corrected Filing Receipt

Date: November 28, 2001

Fax # 703-308-7751

Pages 3

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From: SCULLY, SCOTT, MURPHY & PRESSER

FEB 13 2002

Re: Masaru Hirata

Technology Center 2600

U.S. Patent Appln. No. 09/974,956

MOBILE STATION AND METHOD FOR ALLOCATING
FINGER THEREOF IN CDMA COMMUNICATION
SYSTEMOur Docket: 14990

COMMENTS:

The Filing Receipt for the above-identified patent application is missing information in the section of Foreign Applications. It should read: **FOREIGN APPLICATIONS:**
JAPAN 2000-310501 10/11/2000.

Please send to us a corrected Filing Receipt with the information as it is shown on the pages to follow.

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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/974,956	10/11/2001	2681	740	14990	5	6	2

CONFIRMATION NO. 7595

FILING RECEIPT



OC000000007062540

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FEB 13 2002

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Date Mailed: 11/14/2001

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Masaru Hirata, Tokyo, JAPAN;

Assignment For Published Patent Application

NEC Corporation, Tokyo, JAPAN;

Domestic Priority data as claimed by applicant

Foreign Applications

JAPAN 2000-310501 10/11/2000

If Required, Foreign Filing License Granted 11/13/2001

Projected Publication Date: 04/17/2003

Non-Publication Request: No

Early Publication Request: No

Title

Mobile station and method for allocating finger thereof in CDMA communication system

Preliminary Class

455

日 本 国 特 許 庁
JAPAN PATENT OFFICE

別紙添付の書類に記載されている事項は下記の出願書類に記載されている事項と同一であることを証明する。

This is to certify that the annexed is a true copy of the following application as filed with this Office

出 願 年 月 日
Date of Application:

2000年10月11日

出 願 番 号
Application Number:

特願2000-310501

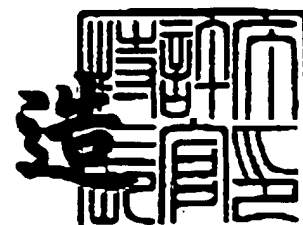
出 願 人
Applicant(s):

日本電気株式会社

2001年 8月31日

特許庁長官
Commissioner,
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Bib Data Sheet

CONFIRMATION NO. 7595

SERIAL NUMBER 09/974,956	FILING DATE 10/11/2001 RULE	CLASS 455	GROUP ART UNIT 2664	ATTORNEY DOCKET NO. 14990
APPLICANTS Masaru Hirata, Tokyo, JAPAN; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/13/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING 5	TOTAL CLAIMS 6
			INDEPENDENT CLAIMS 2	
ADDRESS Paul J. Esatto, Jr. Scully, Scott, Murphy & Presser 400 Garden City Plaza Garden City, NY 11530				
TITLE Mobile station and method for allocating finger thereof in CDMA communication system				
FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	